

M25000012535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

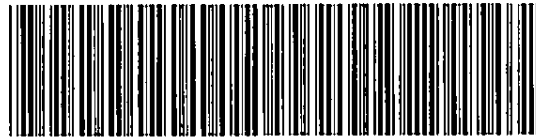
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W25-123162

Office Use Only



700456938797

2025 SEP -3 AM 11:11

FILED

at 11:11 AM

2025 SEP -3 11:11 AM

SEP 05 2025

K. Brumley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 4, 2025

CORRECTED
Please Allow For
Same File Date

SUBJECT: OVM SERVICES, LLC
Ref. Number: W25000123162

We have received your document for OVM SERVICES, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete business name for the MGR in number 8.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 925A00019749

RECEIVED
2025 SEP -5 PM 3:14
TALLAHASSEE, FL

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 09/03/2025

****WALK IN****

ENTITY NAME OVM SERVICES LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 125.00

ACCOUNT # 120160000072

in: c [Signature]

Please call Tina at the above number for any issues or concerns. Thank you so much!

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. OVM Services, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Illinois
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 125 Windsor Drive Ste 110
(Street Address of Principal Office)

6. 125 Windsor Drive Ste 110
(Mailing Address)

Oak Brook, IL 60523

Oak Brook, IL 60523

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

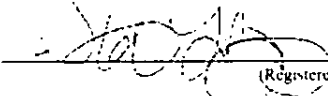
Plantation, Florida 33324
(City) (Zip code)

2025 SEP -3 AM 11:11

RECEIVED
FILED

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>O'Brien Veterinary Management, LLC</u>	☐ Manager	Name: <u>Gregory O'Brien</u>
☐ Member	Address: <u>125 Windsor Drive Ste 110</u>	☐ Member	Address: <u>125 Windsor Drive Ste 110</u>
☐ Authorized	<u>Oak Brook, IL 60523</u>	☒ Authorized	<u>Oak Brook, IL 60523</u>
Person	<u></u>	Person	<u></u>
☐ Other <u></u>	☐ Other <u></u>	☐ Other <u></u>	☐ Other <u></u>
 ☐ Manager	 Name: <u></u>	 ☐ Manager	 Name: <u></u>
☐ Member	Address: <u></u>	☐ Member	Address: <u></u>
☐ Authorized	<u></u>	☐ Authorized	<u></u>
Person	<u></u>	Person	<u></u>
☐ Other <u></u>	☐ Other <u></u>	☐ Other <u></u>	☐ Other <u></u>
 ☐ Manager	 Name: <u></u>	 ☐ Manager	 Name: <u></u>
☐ Member	Address: <u></u>	☐ Member	Address: <u></u>
☐ Authorized	<u></u>	☐ Authorized	<u></u>
Person	<u></u>	Person	<u></u>
☐ Other <u></u>	☐ Other <u></u>	☐ Other <u></u>	☐ Other <u></u>

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

/s/Janice Harmon

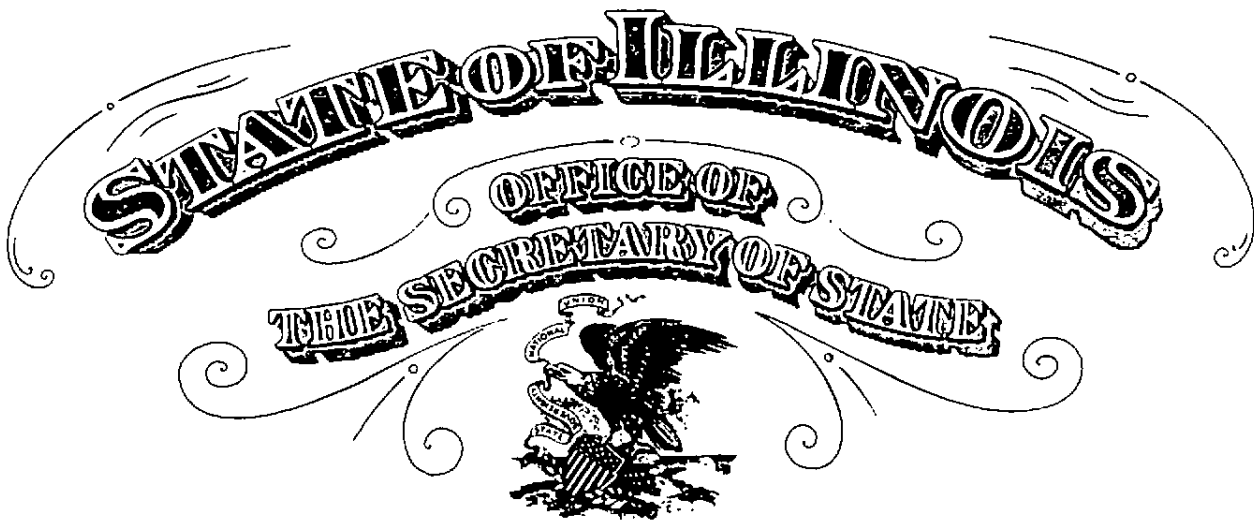
Signature of an authorized person

Janice Harmon

Typed or printed name of signee

File Number

0231363-4



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulas, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

OVM SERVICES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 28, 2007, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 2ND day of SEPTEMBER A.D. 2025 .